PTO/SBADE (08-03)
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Dockort Number  09/900,533		
CLAIMS AS FILED - PART I (Column 1) (Column 2) SMAL								ENTITY	OR .		R THAN ENTITY
L	FOR	HUM	NUMBER FILED		NUMBER EXTRA		RATE	FEE		RATE	FEE
BASIC FEE GT CFR 1.18(a))									OR		
	TAL CLAIMS CFR 1.18(q)	39	39 minus 20 =		•		X 6		OR	X 8 =	:
	EPENDENT CLA CFR 1.15(b)1	MS 4	minus 3 = *					1	OR	X E .	
MULTIPLE DEPENDENT CLAIM PRESENT (17 CFR 1.16(d))						1	**	1	1		<del> </del>
"If the difference in column 1 is less than zero, enter "O" in column 2.							TÖTAL	<del> </del>	OR		1487
							IOIAL		OR	TOTAL	7407
CLAIMS AS AMENDED - PART II											
105	125 06 (Column 1)			(Column 2) (Colum		_	SMALL	ENTITY	OR	OTHER SMALL	
<b>GNOMENT A</b>		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ACCI- TIONAL FEE
	Total GTCFR LINU)	54	Minus	60	· M		X \$=		OR	x \$	
	profesenciaris	6	Minus	-6	• /	]	× \$		OR	×=	
¥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(4))						+**		OR		
no- charges to claims / Recon.						-	TOTAL ADD'L FEE		OR	TOTAL ADDL FEE	
6	6/27/06 (Column 1) (Column 2) (Column 3)						, , , ,				
ENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	ŀ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total erera Lines	50	Minus	60	• /		x s=		OŘ	X 8 *	
	Profesendant (EPCPR 1.1860)	3	Minus	6	•/		X 5=		OR	x s =	1.
AM	FREST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CPR 1.19(d))						+3	<i>/</i> ·	OR		
							TOTAL ADD'L FEE		OR	TOTAL ADDL FEE	
	•	(Column 1)		(Column Z)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADOI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total profatites	•	Minus	••	•		x s=		OR	X 8 -	
	by chy risbill grashed	•	Minus	040	-		x 4=		OR	xs=	
	FREST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,16(d))						+3c		OR	+ :	
							TOTAL ADOL FEE		OR	YOYAL ADOL FEE	
<ul> <li>If the entry in column 1 is less than the entry in column 2, write "O' in column 3.</li> <li>If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20".</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".</li> <li>The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.</li> </ul>											

into collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the ISPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, actualing gathering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments in the amount of time you require to complete this form and/or suggestions for recording this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS LODGESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.